Please type a plus sign (+) inside this box -----PTC/88/81 (02-01)

Approved for use through 19/31/2002, OMS 0651-0036

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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it display a velid OMB control number. Application Number **Piling Date** Robert Parlee First Named Inventor **POWER OF ATTORNEY OR** Techniques for making carbon fiber.... **AUTHORIZATION OF AGENT Group Art Unit** Robert Parlee **Examiner Neme** parlee01.005 Attorney Docket Number I hereby appoint:

Name Registration Number Gordon E. Neison, Patent Attorney 30-093 57 Cantral Streat, P.O. Box 782 Rowley, MA 01989 as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR Practitioners at Customer Number. Pirm or individual Name Address Address City Country Tetephone Fax I am the: Applicent/inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). Signature Date 9-20-02 or required. Submit multiple forms if more then one alignature is required. see below. If Total of 3 free inventors or assignees or freezer of their representative(s) are required. Submit multiple forms if more then one alignature is required.	Practitioners at OR Practitioner(s) no	Customer Number	25247		Place Customer Number Bar Code Label here	,	
Gordon E. Nelson, Patent Attorney 57 Cantral Streat. P.O. Box 782 Rowley, MA 01989 as my/our attomey(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR Practitioners at Customer Number OR Firm or Individual Name Address Address City Country Telephone I am the: Applicant/Inventor. V Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Robert Parise October 1 Signature Date October 1 Signature standard of the entire interest or their representative(a) are required. Submit multiple forms if men ten one signature is applied, see below. In the control of the interest or their representative(a) are required. Submit multiple forms if men ten one signature is required, see below. In the control of the subtrest or their representative(a) are required. Submit multiple forms if men ten one signature is required, see below.				Pegis	tration Number	7	
as my/our attomey(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR Practitioners at Customer Number. Practitioners at Customer Number. OR Practitioners at Customer Number. OR Price Customer Number Record Author Ser Code Label here I am the: Address Address City Country Telephone Fax I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). Signature Name Robert Pariee Passignees of Record Note: Signatures at See inventors or assignees of record of the entire interest or their representative(a) are required. Submit multiple forms if men ten one signature is required, see below. Signature submitted.	Gordon E.	Male and District Add					
as my/cur attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR Practitioners at Customer Number Individual Name Address City Country Telephone I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). Signature Signature Date Robert Parlee Robert Parlee Practice of the entire interest of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. Forms are submitted.							
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Firm or Individual Name Address Address City Country Telephone I am the: Applicant/Inventor. Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SBI96). Signature Name Robert Pariee Robert Pariee President of Pariee Cycles, Inc. Signature Date NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. By *Total of } forms are submitted.	☐ The above-mention OR ☐ Practitioners at Cur	ned Customer Numb	for the above-ider er.	ntified applicati	Place Customer Number Bar Code		
Address City Country Telephone Fax I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). Signature Robert Parlee Robert Pa	Firm or				CLUBOT HOTO		
Country Telephone I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). Signature Robert Pariee Robert Pariee President of Pariee Cycles, Inc. Signature Date 9-20-63 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. By Total of							
Country Telephone I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Robert Parlee President of Parlee Cycles, Inc. Signature Date 9-20-03 NOTE: Signatures of all the inventors or assignees of record of this entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. BY Total of 1 forms are submitted.	Address						
Tetephone I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Robert Parlee Robert Parlee President of Parlee Cycles, Inc. Signature Date NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. By Total of 1 forms are submitted.	City			State	Zio		
Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Robert Parlee Rescribent of Parlee Cycles, Inc. Signature Date 9-21-63 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.	Country		·			·	
Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Robert Parlee President of Parlee Cycles, Inc. Signature Date 9-21-63 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(a) are required. Submit multiple forms if more than one signature is required, see below.	Telephone			Fax			
Name Robert Parlee President of Parlee Cycles, Inc. Signature Date 9-21-63 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.	Applicant/Invent	ard of the entire intere	est. See 37 CFR 3 Inclosed. (Form P1	.71.			
Signature Date 9-24-63 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(a) are required. Submit multiple forms if more than one signature is required, see below. 67 Total of 7 forms are submitted.		SIGNATURE of A	Applicant or Assign	ee of Record			
Date 9-24-65 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(a) are required. Submit multiple forms if more than one signature is required, see below. 67 Total of 7 forms are submitted.	Neme Robert	Parlee 7-	esident	of Parlee Cyc	les, Inc.		
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(a) are required. Submit multiple forms if more than one signature is required, see below. Note	Signature Signature	- Jacket					
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	NOTE: Signatures of all the inventorms if more than one signature is	lors or assignees of recor a required, see below".	d of the entire interest	or their represent	tive(s) are required. Subm	lit multiple	
		ns are submitted.					

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PTO/SB/98 (8-98)

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STATEMENT UNDER 37 CFR 3.73(b)						
Applicant/Patent Owner_Robert Parlee						
Application No./Patent No.:	Filed/Issue Date:					
Entitled: Techniques for making carbo	n fiber bicycle frames					
Parlee Cycles, Inc.	, , , , , , , , , , , , , , , , , , ,					
(Name of Assignee)	(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)					
states that it is:						
1. It the assignee of the entire right, title, and in	nterest; or					
2. an assignee of an undivided part interest						
in the patent application/patent identified above by	virtue of either:					
A. An assignment from the inventor(s) of the pate Patent and Trademark Office at Reel	ent application/patent identified above. The assignment was recorded in the , Frame, or for which a copy thereof is attached.					
OR						
B. [] A chain of title from the inventor(s), of the pater	nt application/patent identified above, to the current assignee as shown below:					
	То:					
The document was recorded in the Pate Reel, Frame, or						
The document was recorded in the Pate						
Reel, Frame, or	r for which a copy thereof is attached.					
3. From:	To:					
The document was recorded in the Pate	ent and Trademark Office at					
Roel, Frame, or	for which a copy thereof is attached.					
[] Additional documents in the chain of ti	itte are listed on a supplemental sheet.					
[] Copies of assignments or other documents in the	chain of title are attached.					
[NOTE: A separate copy (i.e., the original assign	rment document or a true copy of the original document)					
must be submitted to Assignment Division in acc recorded in the records of the PTO. See MPEP 3	cordance with 37 CFR Part 3, if the assignment is to be 302-302.8]					
The undersigned (whose title is supplied below) is em	powered to sign this statement on behalf of the assignae.					
9-24-63	EDRY DU					
Date	Signature					
	Robert Parlee					
	Typed or printed name					
	Praydent					
	Title					

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DECLARATION FOR UTILITY OR

Attorney Docket Number

PTO/58/01 (10-01)

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DESIGN		First Named Inventor PARLEE, Robert				
PATENT APPL	COMPL	COMPLETE IF KNOWN				
(37 CFR 1.63) Application Number						
Declaration Submitted OR with Initial	Declaration Submitted after Initial Filing (surcharge	Filing Date				
		Art Unit				
Flang	(37 CFR 1.16 (e)) required)	Examiner Name				
As the below named inventor, I her	reby declare that:					
My residence, mailing address, and o	oled beteta an ere qirlanestiti	ow next to my name.				
I believe I am the original and first inv	entor of the subject matter v	which is claimed and for which	puce ei Instaq a rt	int on the invention entitled:		
Techniques for making carbo	on fiber hicycle frames					
	The state of the s					
	(Title of the li	recording)				
the specification of which	(VALG OF DIG II	ironauj				
is attached hereto						
OR F						
was filed on (MM/DD/YYYY)						
	ss United States Application Number or PCT International					
				- 		
Application Number	and was amended on (MM/DD/YYYY) (if applicable).					
I horoby state that I have reviewed and understand the second state of the second stat						
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.						
I acknowledge the duty to disclose information which is material to petentability as defined in 37 CFR 1.58, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT						
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 385(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 385(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a fitting data before that of the emitted to the control of the contro						
breeder's rights certificate(s), or any claimed.	PCT International application	on having a filing date befo	re that of the ap	plication on which priority is		
Prior Foreign Application Number(s)	Country	Foreign Filing Date	Priority Not Claimed	Certified Copy Attached?		
		(MAN/DD/YYYY)	Not Claimed	YES NO		
			H			
			H			
			H			
Additional foreign application num	Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:					
Page 1 of 21						

PTO/SB/01 (10-01)

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DECLARATION — Utility r Design Patent Application

	espondence to: Customer Number or Bar Code Label 2		247 OR 🗸		Ø	Correspondence address below	
Name Gordon E. Nelson, Patent Attorney,	PC						
P.O. Box 782 Address 57 Central Street							
City Rowley	City Rowley			MA State			ZIP 01969
Country US	Telep	978-94	8-7632				Fax 1-866-723-0359
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that withful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such withful false statements may jeopardize the validity of the application or any patent issued thereon.							
NAME OF SOLE OR FIRST INVENTOR:		A petition !	nas bed	n filed	for t	his ur	nsigned inventor
Given Name (first and middle [if any]) Robert	·····		Famil or Su	y Name mame	Par	rtee	
Inventor's Signature				· · · · · · · · · · · · · · · · · · ·			Date 9-24-03
Essex Residence: City				US Country			US Citizenship
Malling Address 16a Milk Street							
City Essex MA			ZIP 01929		929	Country	
NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any]) Family Name or Sumane							
Inventor's Signature				Date			
Residence: City	8	Kata		Countr	Y		Citizenship
Malling Address							
City	8	tate		ZiP			Country
Additional Inventors are being named on thesupplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.							
The state of the s							